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Standard Form No. 1034—Revised
Form prescribed by
Comptroller General
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

D. O. Vou. No. _____

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

Bu. Vou. No. 386

U. S. COST REIMBURSABLE
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., *Payee's Account No.* 1394

To _____
(Payee)

_____
(Address) (City) (State)

PAID BY

SAPC 9022
COPY 1 OF 3

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE Cost	UNIT PRICE Per	AMOUNT Dollars	AMOUNT Cts.
		Costs				25,353	.02 ✓
		Use continuation sheet(s) if necessary			Total	$ 25,353	.02 ✓

PAYMENT:
Complete ☐
Partial ☐
Final ☐

Shipped from to Weight Government B/L No.

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

Differences _____

STATOTHR

Amount verified; correct for 25,353 02

(Signature or initials) Jgd

Date 8-

Per

Contract No. A101 Date Req. No. Date Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payme

STATOTHR

† Approved for $ _____

By

Title (Contracting Officer)

SIGN ORIGINAL ONLY

† _____

Title (Approving Officer)

Date SEP 13 1956

STATOTHR THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for $_____ } { on Treasurer of the United States in favor of payee named above.

Cash, $_____, on _____, 19____. Payee _____
(Sign original only)

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* When a voucher is signed by a corporate officer, the name of the corporation and the title of the person signing must be shown in writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for $_____", and

Title _____

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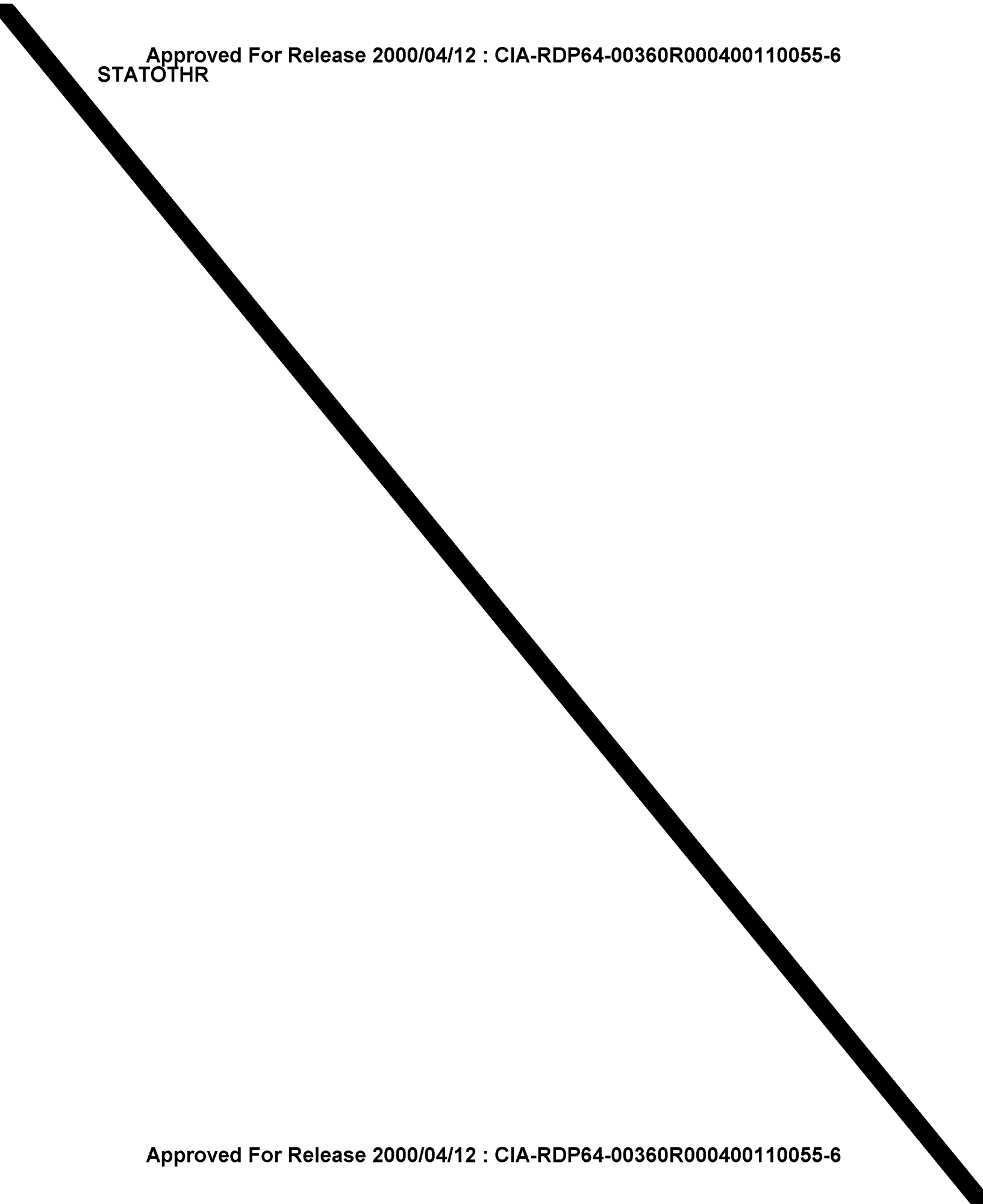
STATOTHR



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KW - 11002 (4-56)

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- ☐ DETAIL INDIRECT DISTRIBUTION
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- ☐ SUMMARY INDIRECT POSTING JOURNAL FOR OPERATING DIVISIONS
- ☐ SUMMARY INDIRECT POS FOR NON-OPERATING DI

ACCOUI

COST CENTER			DATE			CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER
MAJ	INT	SUB	MO	DAY	YR			
25	40	00	08	02	6	51155	INTNL ELEC	528381
25	40	00	08	03	6	51162	GLIDE E,AS	527863
25	40	00	08	03	6	51167	CAL AIR	528416
25	40	00	08	03	6	51168	C / H SUPPLY	510668
25	40	00	08	03	6	51189	N HOLLY TOOL	528275
25	40	00	08	03	6	51200	W CO ELEC	528653
25	40	00	08	03	6	51191	POLYTECH	527586

FORM NO. 1421 THE STANDARD REGISTER CO. - PACIFIC DIVISION OAKLAND LOS ANGELES

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REPORT NO.

RECEIVING REPORT NUMBER	C.E. CODE	CHARGE DISTRIBUTION ACCOUNT	M.J.O.	S. O.	WORK ORDER	DISTRIBUTION AMOUNT
7647	5	12700	5041	02		330 00
9208	5	12700	5041	02		2 177 86
9363	5	12700	5041	02		70 74
16230	5	12700	5041	02		84 15
9366	5	12700	5041	02		1 190 00
9396	5	12700	5041	02		402 97
						425 572 -
						425 572 *
						425 572 * -
7723	5	12700	5041	04		500 00
						500 00 -
						500 00 *
						500 00 * -
					Total p. 1	4 305 72
					" p. 2	14 432 91
					" p. 3	58 62
				5041	Total w/E 8/12/56	18 797 25
				5061	Total w/e 8/12/56	85 20
					Total	18 882 45

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SW - T1002 (4-86)

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COST CENTER MAJ	INT	SUB	DATE MO	DAY	YR	CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER
25	40	00	08	10	6	51303	FED PURCH	S 28498
25	40	00	08	10	6	51303	FED PURCH	S 28498
25	40	00	08	10	6	51348	UNIV RADIO	S 28500
25	40	00	08	07	6	51235	GRAPHIK	S 10099
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51265	E A LIPPS	E 9790
25	40	00	08	09	6	51268	TOOL MAKERS	S 28412
25	40	00	08	10	6	51279	BELL RADIO	S 28421
25	40	00	08	10	6	51328	MET / CONTR	S 28341
25	40	00	08	10	6	51332	MCF / MITCH	S 28413
25	40	00	08	10	6	51271	AIRPAX	S 28519
25	40	00	08	10	6	51291	DEANS	E 9769

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8857	5	12700	5041			1495	
8989	5	12700	5041			1435	
8260	5	12700	5041			4725	
						7655	-
						7655	*
						7655	* -
	5	12700	5041	02		5862	-
22580	5	12700	5041	02		458500	
	5	12700	5041	02		88700	-
21622	5	12700	5041	02		99525	
	5	12700	5041	02		33075	-
21105	5	12700	5041	02		22250	
21693	5	12700	5041	02		33375	
	5	12700	5041	02		11125	-
19225	5	12700	5041	02		242250	
	5	12700	5041	02		121475	-
20456	5	12700	5041	02		532425	
	5	12700	5041	02		141925	-
16729	5	12700	5041	02		304500	
	5	12700	5041	02		304500	-
19805	5	12700	5041	02		468675	
	5	12700	5041	02		122050	-
9166	5	12700	5041	02		13492	
8031	5	12700	5041	02		10584	
9411	5	12700	5041	02		49228	
8300	5	12700	5041	02		6655	
						1406757	-
						1406757	*
						1406757	* -
9580	5	12700	5041	03		22300	
						22300	-
						22300	*
						22300	* -
23787	5	12700	5041	04		6579	
						6579	-
						6579	*
						6579	* -
					Total p. 2	1443291	

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KW - TI002 (4-86)

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COST CENTER			DATE			CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER
MAJ	INT	SUB	MO	DAY	YR			
25	40	00	08	07	6	51235	GRAPHIK	510099

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		ACCOUNT	M.J.O.	S. O.	WORK ORDER	
11979	5	12700	5041	02	Total p. 3	5862 5862 5862 5862

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RW - 71002 (4-66)

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COST CENTER			DATE			CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER
MAJ	INT	SUB	MO	DAY	YR			
25	20	20	06	10	6	51353	W COAST ELEC	528520
25	20	30	06	10	6	51345	THERM/O/N	528563

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RECEIVING REPORT NUMBER	C.E. CODE	CHARGE DISTRIBUTION				DISTRIBUTION AMOUNT	
		ACCOUNT	M.J.O.	S. O.	WORK ORDER		
8657	5	12700	5061	02		59 70	
						59 70	-
8276	5	12700	5061	02		25 50	
						25 50	-
						85 20	*
					Total p.1 w/E 8/12/56	85 20	* -

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